

## *In the Forefront*

# The San Fernando Valley Health Consortium

## A Mustering of Community Resources for Health Manpower

GEORGE J. HOLLAND, PH.D., AND ADDIE L. KLOTZ, M.D., M.P.H.,  
*Granada Hills*

THE SAN FERNANDO VALLEY IS A distinct geographic entity approximately 144 square miles surrounded by mountains on all sides. Although just minutes away from downtown Los Angeles by freeway, it is in many ways isolated and maintains its own character. We may look upon this valley, approximately ten miles wide and fourteen miles long, as a natural health education laboratory containing almost a million and a half inhabitants.

The San Fernando Valley's population growth has been phenomenal and is reflected in the student body growth at San Fernando Valley State College from less than a thousand in 1960 to over 23,000 at present. The past 50 years have seen the Valley evolve from ranch land, walnut and citrus groves to a bedroom community from which a majority commute daily to their jobs in Los Angeles.

The people who live in the San Fernando Valley include many affluent, who are concentrated particularly in the western and southern portions of the valley, as well as approximately a quarter of a million residents in what is known as the Northeast Valley who have an average income far below that of Los Angeles County or the State of California.

In 1969 a community health survey of the Northeast Valley was undertaken by the Northeast Valley Project of the California Regional

Medical Programs, Area IV (University of California at Los Angeles). That survey revealed the health needs of the Northeast Valley to be extensive. The need for health education of the citizens, 71 percent white, 20 percent brown and 9 percent black, was seen as the greatest need. Although health facilities seemed fairly adequate (before the 1971 earthquake), there were considerable problems in accessibility and utilization of those facilities, as well as acceptability. Approximately 15 percent had no health insurance of any kind.

An extreme shortage of health manpower was found to exist in the Northeast Valley. In some areas the physician-to-population ratio was as low as one to four thousand as compared with one to six hundred in other sections of Los Angeles County. Training opportunities for health professionals in the Northeast Valley were also extremely limited. Casa Loma College, in Pacoima, trains only about 100 allied health personnel a year. In that same area one in sixteen persons is employed in health related occupations, but the vast majority are frozen into low-level positions.

As the San Fernando Valley grew in population approximately twenty hospitals were established at various places in the valley in addition to two Veteran's Hospitals and the Olive View County Hospital; two junior colleges were formed and San Fernando Valley State College was designated a four-year institution. At present, however, the San Fernando Valley with its

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Reprint requests to: A. L. Klotz, M.D., San Fernando Valley Health Consortium, 10401 Balboa Boulevard, Granada Hills, Ca. 91344.

one and a half million inhabitants finds itself without a major medical training center. The ingredients are all present: faculty (many of the 1,200 physicians hold teaching appointments at University of Southern California or University of California at Los Angeles), clinical training facilities at the various public and private hospitals, educational institutions and potential trainees. What was needed was a catalytic agent to bring them all together. Thus, the San Fernando Valley Health Consortium was conceived in September 1969.

Representatives from San Fernando Valley State College began meeting with physicians, other health professionals and representatives from the indigent minority health planning group (Area IV RMP Northeast Valley Project). They informally explored the possibility of a joint endeavor by the community and the college in the education of allied health professionals and physicians in order to prepare for the needed changes in health care delivery in the San Fernando Valley. From these early discussions the San Fernando Valley Health Consortium concept developed. San Fernando Valley State College would serve as the umbrella of the Consortium with the primary responsibility for the academic aspects of the program. Community representatives, both professional and consumer, along with students, were to be intimately involved with both the organizational and curricular planning.

San Fernando Valley State College has a good academic base upon which to develop the Consortium, since fully accredited programs are already functioning in school and community health education, school nursing, physical therapy, environmental health, clinical laboratory technology, health statistics and dietetics. Master's level programs are available in many of those areas already. Curricula for medical records librarian, public health nursing, health administration and occupational therapy are proposed. The two junior colleges provide nursing, dental hygiene and other allied health professional training programs. Several of the high schools offer hospital occupations classes.

Through the Consortium, whose membership will comprise representatives from four areas (educational institutions, hospitals and health agencies, the various health professions and consumers), health manpower needs and resources

will be monitored longitudinally. Innovative training programs, opening the health career doors to high school students, will be developed. Articulation at all levels will be accomplished to provide lateral and upward career mobility. From a common core of courses applicable to all categories of allied health personnel, students could matriculate into upper division programs with great flexibility. In addition, the development of a core program will provide a mutual educational experience for those who are supposed to work together as health teams.

Lateral and upward mobility will be encouraged through transfer of credits and no one will be frozen into a particular dead-end channel, but can cross over and go on up the health career ladder. Granting of academic credit for work experience will also be cooperatively established among the various educational institutions.

Recruiting persons into academic areas, allowing them flexibility in moving up the academic ladder within a particular profession as well as laterally into related professions and returning them to their communities well equipped to cope with the health problems of an urban society—these are the Consortium's goals. Since none of the educational institutions in the San Fernando Valley Health Consortium has extensive, highly structured programs of long tradition, it is believed that much of the "academic vested interest obstruction" common in the development of inter-disciplinary programs will be minimal.

A registry of health professional students will be developed for the several San Fernando Valley training institutions so that a career lattice educational system can be effected. Professionals will be encouraged to move vertically, horizontally or diagonally up the career ladder through retraining, continuing education and academic-work equivalency programs organized through the Consortium. Hospitals and other institutions (including the health maintenance organization already in existence as the San Fernando Valley State College Student Health Service) will explore the need for the development of new allied health occupations to meet the needs of the rapidly changing health care delivery system. Experimental pilot retraining programs will be developed in areas such as clinical nursing practitioner, and neighborhood child health services specialists will be organized. A

medical education curriculum for primary physicians will eventually be developed and integrated into the core curriculum concept. Physicians' education must be drastically altered if we expect them to be able to work on professional health teams and to know how to utilize the various resources available to them.

The San Fernando Valley Health Consortium is not just a concept or an idea, it is an organizational reality. In 1970 planning monies were granted from Area IV and Area V of the California Regional Medical Programs. Addie L. Klotz, M.D., has been the College Director of the Consortium on a 20 percent time basis and George J. Holland, Ph.D., has been a half-time associate. In September 1970, an interim steering and planning committee, composed of health professionals, educators, hospital and health agency representatives, as well as a number of consumers, was organized and has been meeting monthly since that time. Eight task forces have been formed, again with representatives from those same four areas on each, to deal with the following areas of concern:

- Medical Education
- Legislative Liaison and Funding
- Review of Consortia Models and Determination of Program Priorities
- Survey of Existing Educational Institutions, Programs, Facilities and Personnel
- Survey of Health Manpower Needs
- Survey of Existing Community Health Facilities, Programs and Personnel
- Review of Curricular Models and Determination of Priorities
- Accreditation and Certification

These task forces have met and, as a result of the determination of priorities, articles of incorporation have already been formulated and approved by the interim steering and planning committee.

In all areas of concern, the concept of the San Fernando Valley Health Consortium has met with strong enthusiasm and support. Several local community hospitals have underlined their support with the actual donation to the Consortium of approximately five thousand dollars. Additional funding is being sought from many

sources, including National Urban Coalition, the Department of Health, Education and Welfare and various private foundations, and continued support is being sought from the Regional Medical Programs.

Because Area V Regional Medical Programs comprises areas outside the boundaries of the San Fernando Valley, and because Ventura County and the Antelope Valley are feeder areas for the San Fernando Valley State College, these areas will also be considered in further planning and organization.

Various professional organizations, including District 6 of the Los Angeles County Medical Association, have endorsed the concept of the Consortium and have offered assistance in its development. Great help has been given by Comprehensive Health Planning, Welfare Planning Council and other planning groups. Legislators, state and federal, have expressed interest and support.

In May a general orientation meeting was held on the State College campus and approximately a hundred persons attended. To this date, over two hundred have volunteered to serve on the various task forces. The interim steering and planning committee was set up as a self-destructing organization which would phase out once the San Fernando Valley Health Consortium Corporation became a working reality. The organizational structure of that body will consist of a board of directors representing health professionals, educational institutions, health care institutions and community consumers. There will be a college director responsible for academic aspects of the Consortium programs including accreditation review, curricular content and research and evaluation. A community director will also report directly to the board of directors. His job will include community health planning and training and overseeing the development of the Health Manpower Registry.

Because of the inherent resources already existing in the San Fernando Valley as well as its over-all youth and freedom from long-standing, inhibitory tradition, we see the success of the San Fernando Valley Health Consortium as a distinct and exciting possibility.